REMARKS

Summary of Office Action

Claims 1-35 are pending. Claims 1-35 have been rejected under 35 U.S.C. § 103(a) being obvious from Portwood et al. U.S. Patent No. 6,305,377 ("Portwood") in view of Edelson et al. U.S. patent No. 5,737,539 ("Edelson").

Applicants Reply

Applicants respectfully traverse the prior art rejections.

Claim 1, Applicants' invention is directed toward generating a profile concerning the prescription therapy practices of physicians in a therapeutic area of interest.

Applicants, in particular, note that their invention is designed toward providing solutions in the contemporaneous legal, regulatory and social environment in which preserving patient privacy is very importance. For example, under current HIPAA regulations, patient records transmitted between parties cannot include patient identifying information (e.g., patient name, social security numbers or addresses). Only "de-identified" patient records may be exchanged, shared or communicated between parties such as hospitals, pharmacies, insurers, and commercial or non- commercial researchers. Constructing longitudinally linked databases from patient records that do not contain patient identifying information is a data processing challenge, which has been overcome by assignee as described, for example, in co-pending U.S. Patent application filings by Mark Kohan et al. In the instant specification, "whenever a 'patient' or 'patient data' is described . . . it is understood that the patient's identity and personal information are excluded (i.e., the patient is 'de-identified') in order to maintain confidentiality of patient records".

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Method claims 1 and 10, and system claim 25 specifically relate to the processing of 'de-identified' patient records. Claims 1 and 10, for example, both recite "receiving... de-identified patient prescription records". Claim 25, for example, recites "a mass storage device for storing... de-identified patient prescription records."

Applicants respectfully submit that Portwood and Edelson do not show, describe or suggest the processing of "de-identified" patient records. Portwood and Edelson both relate to data processing environments in which patient records are or were not de-identified. For example, Edelson FIGS. 1 and 2 explicitly show patient name, social security number information. Close reading of Edelson shows no awareness or suggestion by either Edelson o Portwood of "de-identified" patient records." Edelson's prescription management system explicitly relies on records having "patient identifiers" (see e.g., col. 4 lines 30-35). Similarly, Portwood patient prescription compliance system explicitly relies on "patient data [that] include[s] the patient's name, social security number, and address' (See col. 8, lines 54 -65, col. 9 lines 6-19, etc.).

Portwood and Edelson, viewed individually or in combination, do not show the elements of claims 1, 10, and 25 that specifically relate to the processing of "de-identified" patient records.

Therefore claims 1, 10 and 25 are patentable over the cited references.

Further, claims 2-9, 11-24 and 26-35 that depended on claims 1, 10 and 25, respectively, are patentable over the cited references for at least the same reasons that their parent claims are patentable.

Conclusion

This application is now in condition for allowance. Reconsideration and prompt allowance of which are respectfully requested. If there are any remaining issues to be resolved, applicants respectfully requests that the Examiner kindly contact the undersigned attorney by telephone for quick resolution.

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